Anited States of America

Department of Transportation—federal Aviation Administration

Supplemental Type Certificate

Number SA8251SW-D

This certificate, issued to

Dassault Falcon Jet P.O. Box 967

Little Rock, Arkansas 72203

certifies that the change in the type design for the following product with the limitations and conditions

therefor as specified hereon meets the airworthiness requirements of Part

25 of the Federal Aviation

Regulations.

Original Product - Type Certificate Number:

A50NM

Dassault Aviation

Model:

Falcon 2000

Description of Type Design Change:

Installation of the UNS-1M Flight Management System in accordance with Drawing List Report No. F2M-01029, Revision A dated 10-31-95, or later FAA approved revision.

Limitations and Conditions:

FAA Approved Airplane Flight Manual Supplement, Report No. 36412-1, Revision A dated 11-8-95, or later FAA approved revision is required.

Compatibility of this modification with other previously approved modifications must be determined by the installer.

This certificate and the supporting data which is the basis for approval shall remain in effect until surrendered, suspended, revoked, or a termination date is otherwise established by the Administrator of the Federal Aviation Administration.

Date of application:

July 5, 1995

Date reissued :

Date of issuance:

October 12, 1995

11-8-95 Date amended:

Rev. 1

By direction of the Administrator

Andrew A. Boersma DASSSW COORDINATOR

(Title)

Any alteration of this certificate is punishable by a fine of not exceeding \$1,000, or imprisonment not exceeding 3 years, or both.

| INSTRUCTIONS: The transfer endorsement below may be used to notify the appropriate FAA Regional Office the transfer of this Supplemental Type Certificate. | | | |
|--|-----------------------------|-------------------------|---------------------|
| TRANSFER ENDORSEMENT Transfer the ownership of Supplemental Type Certificate Number | | | |
| | | to (Name of transferee) | |
| | | (Address of transferee) | (Number and street) |
| | (City, State, and ZIP code) | | |
| from (Name of grantor) (Print or type) | | | |
| (Address of grantor) | (Number and street) | | |
| | (City, State, and ZIP code) | | |
| Extent of Authority (if licensing ag | reement): | | |
| | | | |
| | | | |
| Date of Transfer: | | | |
| Signature of grantor (In ink) | · | | |